## **STATEMENT OF**

FORM 1	ORGANIZATION (See instructions)	Office use only
NAME OF COMMITTEE (in f	(Check if name Example: If typying, to over the lines	
ITC Holdings (	Corp. PAC	
ADDRESS (number and s	201 Townsend Street	<del> </del>
(Check if address	Suite 900	
is changed)	Lansing	MI
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	wsiegel@dykema.com	
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if address is changed)		
2. DATE 0 3	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
3. FEC IDENTIFICA	TION NUMBER C C00388462	
4. IS THIS STATEM	ENT NEW (N) OR X AMENDED	) (A)
I certify that I have examin	ned this Statement and to the best of my knowledge and belief it is true, or	correct and complete
Type or Print Name of <sup>1</sup>	Treasurer Wendy Siegel	
Signature of Treasurer	Electronically Filed by Wendy Siegel	Date 0 3 / 1 3 / 2 0 0 9
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPO	•
Office Use Only	For further information Federal Election Toll Free 800-42	4-9530 (Revised 02/2009)